

SISKIYOU COUNTY

LOCAL TRANSPORTATION COMMISSION



Social Services Transportation Advisory Council (SSTAC) Application for Appointment

Membership on the SSTAC requires appointment by Siskiyou County Local Transportation Commission; therefore, it is necessary to present the Commission with relevant information concerning each nominee.

If you are interested in serving on the Siskiyou County Local Transportation Commission's Social Services Transportation Advisory Council (SSTAC), please complete the following application.

Applications are also available online at:

[Local Transportation Commission](#).

Name: _____

Address: _____

Home Phone: _____ Business Phone: _____

Email Address: _____

Time Resided in the County: _____

Previous experience on a relevant County/City/Town Commission or Committee:



Relevant Work/Volunteer Experience

Organization	Address	Position	Dates

Statement of Qualifications:

Please briefly state why you are interested in serving on the SSTAC and why you are qualified for appointment. Attach additional pages, if necessary.

Category Listing:

The Social Services Transportation Advisory Council is subject to the provisions of PUC 99238 of the Transportation Development Act.

The SSTAC shall consist of the following members: Please check all categories that apply to you.

Category 1: Potential transit user who is 60 years of age or older _____

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- Category 2 Potential transit user who is disabled. _____
- Category 3 Representative of the local social service providers for seniors. _____
Agency Name: _____
- Category 4: Representative of local social service providers for the disabled. _____
Agency Name: _____
- Category 5 Representative of social service provider for persons of limited means. _____
Agency Name: _____
- Category 6 Representative from the local consolidated transportation Service agency. _____
Agency Name: _____
- Category 7 At Large Appointment _____

The Council currently has three term appointment periods:

One-Year _____ Two-Year _____ Three-Year _____

Please indicate which term(s) you would be willing to serve.

At the end of a term, a member can reapply for an additional three-year term.

Certification

I certify that the above information is true and correct and I authorize the verification of the information in the application in the event I am a finalist for the appointment.

Signature

Date

Appointment will be considered at a Siskiyou County Local Transportation Commission's meeting. Any information you submit on your application will become a matter of public record.

Return Application to:

Applications can be submitted via email to melissa@siskiyoucoltc.org

Or sent via USPS to: 1312 Fairlane Road, Suite 2
Yreka, California 96097